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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

**Docket Number (Optional)** 

FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			MI22-1896	MI22-1896	
Application Number 10/050,373			Filed January 15	Filed January 15, 2002	
For Meth	ods of Forming a Nitrogen Enri	ched Region			
Art Unit 2813			Examiner Laura M.	Examiner Laura M. Schillinger	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee					
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	
X	Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$460.00	
	Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$	
	Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$	
	Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$	
Applica	nt claims small entity status. See 37 CFR	1.27.			
X A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to					
Deposit Account Number 23-0925  I have enclosed a duplicate copy of this sheet.  WARNING: Information on this form may become public. Credit card information should not be included on this form.					
Provide credit card information and authorization on PTO-2038.					
I am the	applicant/inventor.		•		
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).					
x attorney or agent of record. Registration Number 46,79			per <u>46,791</u>	[	
attorney or agent under 37 CFR 1.34.  Registration sumber if acting under 37 CFR 1.34					
			1/2/08		
	ggnature		— ————————————————————————————————————	Date	
	Robert C. Hyta			(509) 624-4276	
Typed or printed name			Telepho	ne Number nultiple forms if more than one	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total	of forms ar	e submitted.			
JSPTO to proces omplete, includion omments on the J.S. Patent and	information is required by 37 CFR 1.136(a). The inforss) an application. Confidentiality is governed by 35 Unity and submitting the complete of amount of time you require to complete this form and Trademark Office, U.S. Department of Commerce, P.C. ADDRESS. SEND TO: Commissioner for Patilify you need assistance in complete	J.S.C. 122 and 37 CFR I application form to the Vor suggestions for redu D. Box 1450, Alexandria ents, P.O. Box 1450	1.11 and 1.14. This collection is esting USPTO. Time will vary depending useing this burden, should be sent to the type of type of type of the type of typ	mated to take 6 minutes to pon the individual case. Any he Chief Information Officer,	
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